

## Health Datapalooza Remarks by Todd Park, June 2, 2014

Thank you Bryan!

Hello! It's an absolute blast and honor to be at the fifth ever Health Datapalooza!

It brings me so much joy to see 2,000 of you here today.

2,000 innovators, working with incredible ingenuity and passion to harness the power of data and technology to change health care for the better.

You are all doing astounding work!

And I'm thrilled to welcome, for the third year in a row, our friends and colleagues from the United Kingdom. Thank you to the Honorable Jeremy Hunt for leading the delegation and believing in the power of data to improve health care as much as we do.

***There has never been a better time to be an innovator and entrepreneur at the intersection of data and health care than right now.*** The world is changing in front of our eyes – in 4 big ways.

**First, we have a smarter healthcare system** that is beginning to reward quality and value – not volume.

We are seeing new payment models take root across America:

- Value-based purchasing programs that reward providers based on the quality of care they provide
- Accountable care organization, bundled payment, and medical home programs that encourage providers to invest in redesigning care for higher quality and better service delivery
- And more.

Just looking at Medicare accountable care organizations alone: there are now over 350 ACOs serving over 5 million Medicare beneficiaries.

Much of this payment reform has been catalyzed by work being done by the Centers for Medicare and Medicaid Services under the Affordable Care Act to innovate Medicare payment models and help support provider innovation of care delivery models. A growing number of private payors are engaged in similar innovation.

While still in its early phases, this work collectively signals a fundamental shift in how the country will pay for health care – to a paradigm where we pay not for volume, but for value, for health improvement, for better outcomes. Where we pay in ways that better support health care providers making more investments to proactively improve population health and prevent disease and complications.

This is of critical importance to efforts to harness the power of data to improve care and health. The more these kinds of payment models spread, the stronger the business case will be, the greater the financial capacity of the health care system will be, to invest in how data can improve patient and population health. This will in turn encourage more and more innovators and entrepreneurs to enter the ecosystem to help make this happen, which will in turn turbocharge innovation and improvement, which will in turn aid and abet the spread of better payment and care delivery models, in the kind of virtuous cycle that has powered continuous improvement in so many other industries.

**Second, we are witnessing historic levels of electronic health record adoption.**

In 2009, the year before the inaugural Health Datapalooza, only 1 in 8 hospitals were using a basic electronic health care record. By 2013, this number had increased more than four-fold. And EHR adoption among physicians more than doubled in the same time period. The vaults and stacks of paper records are being phased out.

A big driver of progress has been the incentives, requirements, and support built into the Recovery Act, helping doctors and hospitals make this important transition.

Just over 9 in 10 hospitals and two-thirds of professional providers have now qualified for electronic health record incentive payments from Medicare and Medicaid, for adopting or using certified EHR technology to meet the objectives and measures established by the program, known as meaningful use.

Meaningful use requirements escalate over time – which will amp up providers exchanging data with each other, making data accessible to patients, and more.

No longer is a record of a prescription a photocopy. Now, it's bits and bytes of machine-readable goodness that can be put to use by patients and the providers who care for them. This is an incredible advancement.

**And speaking of which, this brings me to the third megatrend: patients' ability to get their own data. In this area, there has been dramatic and growing progress.**

- The “Blue Button” movement, which began a few years ago, is a growing phenomenon across the public and private sectors, powered by the principle that consumers should be able to securely access their own information, and share it with people they trust.
- More than 500 private-sector companies and organizations have pledged their support to increase patient access to and use of their own health data.
- And today, more than 150 million Americans are able to access their own digital health information from health plans, providers, pharmacies and labs. This includes more than 30 million Medicare enrollees who now have secure access to and the ability to download their own claims information. In addition, the top three largest retail pharmacies – Walgreens, CVS Caremark, and Rite Aid – which together account for 40% of all dispensed prescription drugs in the US -- are providing their customers with secure, online access to their prescription information.

- And to make a point: patients' access to their own data is a right under HIPAA.
- HIPAA modifications that went into effect last year clarify that patients can get a copy of their own electronic health info.
- And in addition, in February, HHS issued a landmark rule with respect to patients and their lab results. Historically, the only way to get a lab result was through your doctor. You as a patient were barred from going directly to the laboratory to get your result – until this February, when HHS released a final rule that amends HIPAA and CLIA regulations to give patients the option to obtain their test reports directly from the lab.

Secure patient access to their own data is of fundamental importance to patients' ability to take control of their own health care, and is therefore of fundamental importance to the improvement of health care. It is a cause that this Administration and so many others in this room will continue to champion.

**Finally, more and more general data and information resources are becoming available and accessible in machine-readable form to help power health care improvement.**

The government has continued to be a leader in this space, opening up access to government information resources to the public and to entrepreneurs while rigorously protecting privacy. Today, there are nearly 1,600 datasets available to all at HealthData.gov. This data liberation has been fuel for entrepreneurs, innovators, and researchers across the country to build meaningful products and services that save lives, create jobs, and strengthen the economy.

President Obama believes in open data so strongly that he signed a historic Open Data Executive Order last May to ensure that opening government data in machine-readable form, while rigorously protecting privacy and security, is the default practice for all agencies.

With all of this data being unleashed, we needed to make it easier to *find* these data. Earlier this year, Data.gov was re-launched with new features that make it easier to search through the 100,000+ datasets now publicly available from federal, state, and local governments.

HHS has been a strong leader on the data liberation front. At HHS's Centers for Medicare and Medicaid services, remarkable progress on data accessibility has happened in the last year, spearheaded by our amazing colleague Niall Brennan, the inaugural leader of CMS's recently created Office of Information Products and Data Analytics, and his team:

- In May 2013, CMS released detailed information on average hospital charges for the hundred most common Medicare inpatient admissions, followed in June by data on selected outpatient procedures. These data have been downloaded hundreds of thousands of times.
- In April 2014, CMS released detailed information on services and procedures provided to Medicare beneficiaries by physicians and other health care professionals. This release collectively covered more than 880,000 unique providers, offering unprecedented insights into how care is delivered in the Medicare program, such as how many knee surgeries an orthopedist has performed, or the relationship between patient volume and a physician's years of experience. These data have also now been downloaded hundreds of thousands of times.

With respect to making Medicare data more accessible, under rigorous beneficiary privacy protections, for researchers and health care providers:

- Researchers can now virtually access and analyze CMS's vast store of Medicare claims data, at a fraction of the cost of prior methods;
- CMS is providing Accountable Care Organizations with monthly claims feeds covering beneficiaries being cared for by physicians in ACOs.

- And 12 Qualified Entities outside CMS are combining Medicare and private sector claims data to create comprehensive new reports on the performance of hospitals, physicians, and other health care providers.

Our colleagues at the FDA are also doing amazing work to liberate valuable drug data under the leadership of Chief Health Informatics Officer Taha Kass-Hout:

- Today, I'm excited to share that the FDA is launching the public beta of **openFDA**, an ambitious new public access platform focused on offering high-value FDA public datasets to software developers and researchers through an API.
- Today's launch includes millions of public drug adverse event and medication error reports submitted to the FDA since 2004. One will no longer have to rely upon difficult-to-parse quarterly reports or FOIA requests to get this information.
- And this is only the beginning for open FDA. Throughout the summer the openFDA initiative will be adding APIs for Product Recalls and Product Labels too. We can't wait to see what you build with this information!

And HHS's National Institutes of Health, of course, has been doing open data since long before it was cool, along with pioneering work in the arena of open science. The idea of making the results of scientific research more open is a priority for this Administration. In 2012, Assistant to the President for Science and Technology John Holdren issued a memorandum directing Executive departments and agencies to make publications describing Federally funded scientific research freely available to the public. In the past, Federally-funded results were available only to those who could afford a subscription. Now, they will be available to all. Now that's democratizing information!

Those four megatrends – (1) a health system that is gravitating towards quality and value, (2) rapid digitization of health records, (3) increasing patient access to their own records, and (4) growing access to key general information resources, in machine-readable form -- are

combining to create a world of unprecedented opportunity for innovators in health care.

And innovators are taking action accordingly!

As just one indicator of this, according to Rock Health, venture capital funding for digital health companies surpassed \$1.97 billion in 2013, growing 39% over the previous year and more than doubling since 2011.

In 2013, 186 digital health companies each raised more than \$2 million in capital – to develop and promulgate innovations that help patients take control of their own care, that help providers improve care, and that help the health care marketplace become more transparent, more efficient, effective, and competitive.

As another indicator, witness this room. There is no better place to see data-powered innovation in health care happen than right here, at the Health Datapalooza – which has grown over the past 5 years into a 3-day celebration of health care innovation now spanning 52 panel sessions, 8 trainings, an app expo with 75 demos, and a code-a-palooza.

You represent 2,000 reasons to be optimistic about the future of American health care -- joining the ranks of thousands of Datapaloozers who over the past five years have birthed a movement – a movement to save lives and improve them by harnessing the power of data and innovation:

- Passionate patient advocates like Regina Holliday, e-Patient Dave, and Sherry Reynolds
- Remarkable medical leaders like Drs. Harvey Fineberg and Judy Salerno of the Institute of Medicine, Pete Hudson and Wayne Guerra, ER docs and founders of pioneering data-powered company iTriage, and many more
- Incredible leaders from the world of entrepreneurship and business like Dick Foster, Bob Kocher, Steve Krein and Startup Health, Halle Tecco and Rock Health, Tim O'Reilly, Vivian Riefberg,

Simmi Singh, David Knott, and others who have helped catalyze a rising tide of health data and tech-powered entrepreneurship and innovation

- Extraordinary nonprofit leaders like Dwayne Spradlin and all of his partners in the Health Data Consortium, the remarkable force behind the Health Datapalooza and a rising tide of health data education and advocacy
- Truly amazing public servants like Greg Downing, Bryan Sivak, Aman Bhandari, Niall Brennan, Taha Kass-Hout, Ed Sondik, Farzad Mostashari, Aneesh Chopra, Peter Levin, Bill Corr, and Secretary Kathleen Sebelius, who have embraced this movement and sought to help it in every way they can
- And visionary technologists like Fred Trotter, Arien Malec, and George Thomas

I'd like to end my talk by talking about George.

Our community is strong because of the many amazing individuals that keep championing progress. This year, our community lost a most extraordinary person in George Thomas.

George was the brilliant, passionate Chief Data Architect at HHS. As a proud civil servant, he shared with me his vision for a better world supported by open health data and linked data.

George was a key voice and leader from the earliest days of the health data movement. He was deeply passionate about the cause of using data for the well-being of others, and he believed intensely in the web's power to be a vibrant force for civic change and social good.

George left us a few weeks ago after a long battle – but his life's work lives on through all of us. It's a profound honor to have Suzanne Thomas as my special guest for the Datapalooza this year. She is here today to see the magnificent work that her husband was part of these past 5 years.



It is also wonderful to have her here as we announce that the Health Data Consortium is creating the George Thomas Fellowship in Health Data Science and Engineering. This fellowship will support the post-graduate training of computer and information scientists, engineers, and mathematicians in health data science. It will also help support the next generation of entrepreneurs in overcoming barriers and advancing interoperability, analytics, and machine-learning in health data systems.

We can think of no greater tribute to George than to have his spirit guide the creation of a future generation of innovators who will harness the power of data to save and improve lives.

Thank you so much, Suzanne, for gracing us with your presence today. I am so proud to have been George's teammate, and so proud to have been his friend.

May God bless you. May God bless George's spirit. And may his spirit continue to be with the movement that he so wonderfully embodied -- a movement propelled forward with such passion and energy by everyone in this room.

God bless all of you, and may George be with you, always.